



09-06-05

JPW/652 \$

PTO/SB/21 (09-04)

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

45

Application Number

09/471,669

Filing Date

December 24, 1999

First Named Inventor

Anderson, John P.

Art Unit

1652

Examiner Name

Walicka, Malgorzata A.

Attorney Docket Number

015270-006430US

**ENCLOSURES** (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment (36 pp.).	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request (1 p., submitted in duplicate).	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Return Postcard
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement (3 pp.) w/attached PTO/SB08A (1 p.), PTO/SB/08B (1 p.), and cite nos. 185, 186, 187, and 188.*	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<b>Remarks</b> The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	*Cite Nos. not included in "Total Number of Pages in This Submission."	

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Rosemarie L. Celli		
Date	September 1, 2005	Reg. No.	42,397

**CERTIFICATE OF TRANSMISSION/MAILING**

Express Mail Label: EV 732 173 681 US

I hereby certify that this correspondence is being deposited with the United States Postal Service with "Express Mail Post Office to Address" service under 37 CFR 1.10 on this date September 1, 2005 and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA, 22313-1450 on the date shown below.

Signature			
Typed or printed name	Rosemarie L. Celli	Date	September 1, 2005